

## **APPLICATION PROCEDURES FOR SUBSTITUTING**

- Complete necessary paperwork with the Alabama State Department of Education Teacher Certification Office. (<https://www.alabamaachieves.org/teacher-center/teacher-certification/>) **Scroll down to Other Approaches-Substitute. Click on “Form SUB” to view the form. Complete the application and print it. Then go to the link on the form (<https://www.alabamainteractive.org/education/>) to pay the \$30 application fee. Print a copy of your receipt. Bring completed pages back to the Superintendent’s office for approval.**
- Complete Piedmont City Schools Application for Substitute Teaching
- Provide a copy of High School Diploma or equivalent.
- Complete W-4 and A-4 tax withholding forms
- Drug Free Workplace Statement must be signed
- Acceptable Use for Technology Resources must be signed
- Complete I-9 and attach a copy of your **social security** card and a **current driver's license (front and back)**. Cards must have current name and date. We will not accept an expired license.
- Complete Direct Deposit form.
- Follow the enclosed directions for fingerprinting services with Gemalto Cogent Systems. (<https://www.aps.gemalto.com/AL>) The fingerprint fee of \$48.15 is explained in the paperwork provided.

**Substitute hires must go before the Board of Education. After Board approval your information will be referred to E-Verify. This system is used to verify the employment eligibility of newly hired employees based on the Illegal Immigration Reform and Immigrant Responsibility Act. After you have been approved you will receive a letter and/or email from the Aesop administrator with your new id and password and directions for registering for Employee Self Service portal to receive pay statements online.**

**PIEDMONT CITY SCHOOLS**  
**SUBSTITUTE TEACHER PAY**

Pay Level I

\$58.00 daily – Possession of a high school diploma or GED diploma

Pay Level II

\$63.00 daily - Completion of at least 2 years of study at an institution of higher education **OR an associate's or higher degree**

Pay Level III

\$73.00 daily – Completion of a four year college degree program

Extended Leave Teacher Substitutes (10 consecutive days for same teacher)

\$100.00 daily – Possession of a valid teaching certificate

Extended Leave Custodian Substitutes (10 consecutive days at same position)

\$73.00 daily

Extended Leave Instructional Aide Substitutes (10 consecutive days same position)

\$80.00 daily

*ALL SUBSTITUTES MUST HOLD EITHER A VALID SUBSTITUTE TEACHING CERTIFICATE OR REGULAR TEACHING CERTIFICATE AND HAVE COMPLETED A BACKGROUND CHECK .*

*ALL SUBSTITUTES MUST BE APPROVED BY THE SCHOOL BOARD.*

**PIEDMONT CITY SCHOOLS  
502 HOOD STREET, W  
PIEDMONT, AL 36272**

**SUBSTITUTE APPLICATION**

This Employer Participates in E-Verify

Degree/Non-Degree (Substitute Teacher's License) \_\_\_\_\_ Certificated (Valid AL Teaching Certificate) \_\_\_\_\_ Classified (CNP, Aide, Custodian) \_\_\_\_\_

**Personal Information**

Social Security No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle

Present Address \_\_\_\_\_

Street City State Zip

Telephone \_\_\_\_\_ Alternative Telephone \_\_\_\_\_ E-Mail Address \_\_\_\_\_

**DATA FOR AFFIRMATIVE ACTION (optional)** Date of Birth \_\_\_\_\_ Sex: Male \_\_\_\_\_ Female \_\_\_\_\_

Ethnicity:

White Non-Hispanic \_\_\_\_\_ Black Non-Hispanic \_\_\_\_\_ Hispanic \_\_\_\_\_ Native Hawaiian/Other Pacific Islander \_\_\_\_\_

American Indian/Alaska Native \_\_\_\_\_ Asian \_\_\_\_\_

**Educational Background**

High School Diploma ☐ GED ☐

College or University	Date of Graduation	Degree Held

**Additional Information**

Have you ever been convicted of or entered a plea of no contest to a felony or misdemeanor other than a minor traffic violation?  
Yes \_\_\_\_\_ No \_\_\_\_\_ If you answer "yes" please provide details of conviction including date and place of conviction. A "yes" answer will not automatically result in a non-issuance but may result in a request for additional information.

**If Degree/Non-Degree or Certificated:**

Do you currently hold an Alabama Teaching Certificate? Yes \_\_\_\_\_ No \_\_\_\_\_ Valid until \_\_\_\_\_

If no, have you applied for a certificate? Yes \_\_\_\_\_ No \_\_\_\_\_ Date Applied \_\_\_\_\_

**Building Preference:**

Piedmont Elementary School PK-05 ☐ Piedmont Middle School 06-08 ☐ Piedmont High School 09-12 ☐

**AGREEMENT**

I hereby certify that the above information to the best of my knowledge is true, accurate and complete. Any misrepresentation or willful omissions of the facts shall be sufficient cause for the disqualification of this application or termination of employment. Furthermore, it is understood that this application and records become the property of the Piedmont City School System, which reserves the right to accept or reject it. I further agree to observe all rules, regulations and policies of the district.

I hereby authorize the district to conduct work history, personal references or police record inquiries to determine my acceptability for employment.

Signature of Applicant Date \_\_\_\_\_

The Piedmont City School District does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs and activities and provides equal access to the Boy Scouts and other designated youth groups. The following people have been designated to address inquiries regarding the non-discrimination policies:

Mr. Mike Hayes, Title IX Coordinator, 502 Hood Street West, Piedmont, AL 36272 (256) 447-8831

Mrs. Debra Ledbetter, 504 Coordinator, 504 Hood Street, Piedmont, AL 36272 (256) 447-7483

Mrs. Revonda Pruitt, Title II Coordinator, 504 Hood Street, Piedmont, AL 36272 (256) 447-7483

For further information on notice of non-discrimination, visit <http://wdcrobcolp01.ed.gov/CFAPPS/OCR/contactus.cfm> for the address and phone number of the office that serves your area, or call 1-800-421-3481.

**Employee's Withholding Certificate**

OMB No. 1545-0074

**2022**

- ▶ **Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay.**  
 ▶ **Give Form W-4 to your employer.**  
 ▶ **Your withholding is subject to review by the IRS.**

**Step 1:  
Enter  
Personal  
Information**

(a) First name and middle initial	Last name	(b) Social security number
Address		▶ <b>Does your name match the name on your social security card?</b> If not, to ensure you get credit for your earnings, contact SSA at 800-772-1213 or go to <a href="http://www.ssa.gov">www.ssa.gov</a> .
City or town, state, and ZIP code		
(c) <input type="checkbox"/> <b>Single</b> or <b>Married filing separately</b> <input type="checkbox"/> <b>Married filing jointly</b> or <b>Qualifying widow(er)</b> <input type="checkbox"/> <b>Head of household</b> (Check only if you're unmarried and pay more than half the costs of keeping up a home for yourself and a qualifying individual.)		

**Complete Steps 2–4 ONLY if they apply to you; otherwise, skip to Step 5.** See page 2 for more information on each step, who can claim exemption from withholding, when to use the estimator at [www.irs.gov/W4App](http://www.irs.gov/W4App), and privacy.

**Step 2:  
Multiple Jobs  
or Spouse  
Works**

Complete this step if you (1) hold more than one job at a time, or (2) are married filing jointly and your spouse also works. The correct amount of withholding depends on income earned from all of these jobs.

Do **only one** of the following.

(a) Use the estimator at [www.irs.gov/W4App](http://www.irs.gov/W4App) for most accurate withholding for this step (and Steps 3–4); **or**

(b) Use the Multiple Jobs Worksheet on page 3 and enter the result in Step 4(c) below for roughly accurate withholding; **or**

(c) If there are only two jobs total, you may check this box. Do the same on Form W-4 for the other job. This option is accurate for jobs with similar pay; otherwise, more tax than necessary may be withheld . . . ▶ ☐

**TIP:** To be accurate, submit a 2022 Form W-4 for all other jobs. If you (or your spouse) have self-employment income, including as an independent contractor, use the estimator.

**Complete Steps 3–4(b) on Form W-4 for only ONE of these jobs.** Leave those steps blank for the other jobs. (Your withholding will be most accurate if you complete Steps 3–4(b) on the Form W-4 for the highest paying job.)

**Step 3:  
Claim  
Dependents**

If your total income will be \$200,000 or less (\$400,000 or less if married filing jointly):

Multiply the number of qualifying children under age 17 by \$2,000 ▶ \$

Multiply the number of other dependents by \$500 . . . ▶ \$

Add the amounts above and enter the total here . . . **3** \$

**Step 4  
(optional):  
Other  
Adjustments**

(a) **Other income (not from jobs).** If you want tax withheld for other income you expect this year that won't have withholding, enter the amount of other income here. This may include interest, dividends, and retirement income . . . **4(a)** \$

(b) **Deductions.** If you expect to claim deductions other than the standard deduction and want to reduce your withholding, use the Deductions Worksheet on page 3 and enter the result here . . . **4(b)** \$

(c) **Extra withholding.** Enter any additional tax you want withheld each **pay period** . . . **4(c)** \$

**Step 5:  
Sign  
Here**

Under penalties of perjury, I declare that this certificate, to the best of my knowledge and belief, is true, correct, and complete.

▶ **Employee's signature** (This form is not valid unless you sign it.) ▶ **Date**

**Employers  
Only**

Employer's name and address	First date of employment	Employer identification number (EIN)
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## General Instructions

Section references are to the Internal Revenue Code.

### Future Developments

For the latest information about developments related to Form W-4, such as legislation enacted after it was published, go to [www.irs.gov/FormW4](http://www.irs.gov/FormW4).

### Purpose of Form

Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. If too little is withheld, you will generally owe tax when you file your tax return and may owe a penalty. If too much is withheld, you will generally be due a refund. Complete a new Form W-4 when changes to your personal or financial situation would change the entries on the form. For more information on withholding and when you must furnish a new Form W-4, see Pub. 505, Tax Withholding and Estimated Tax.

**Exemption from withholding.** You may claim exemption from withholding for 2022 if you meet both of the following conditions: you had no federal income tax liability in 2021 **and** you expect to have no federal income tax liability in 2022. You had no federal income tax liability in 2021 if (1) your total tax on line 24 on your 2021 Form 1040 or 1040-SR is zero (or less than the sum of lines 27a, 28, 29, and 30), or (2) you were not required to file a return because your income was below the filing threshold for your correct filing status. If you claim exemption, you will have no income tax withheld from your paycheck and may owe taxes and penalties when you file your 2022 tax return. To claim exemption from withholding, certify that you meet both of the conditions above by writing "Exempt" on Form W-4 in the space below Step 4(c). Then, complete Steps 1(a), 1(b), and 5. Do not complete any other steps. You will need to submit a new Form W-4 by February 15, 2023.

**Your privacy.** If you prefer to limit information provided in Steps 2 through 4, use the online estimator, which will also increase accuracy.

As an alternative to the estimator: if you have concerns with Step 2(c), you may choose Step 2(b); if you have concerns with Step 4(a), you may enter an additional amount you want withheld per pay period in Step 4(c). If this is the only job in your household, you may instead check the box in Step 2(c), which will increase your withholding and significantly reduce your paycheck (often by thousands of dollars over the year).

**When to use the estimator.** Consider using the estimator at [www.irs.gov/W4App](http://www.irs.gov/W4App) if you:

1. Expect to work only part of the year;
2. Have dividend or capital gain income, or are subject to additional taxes, such as Additional Medicare Tax;
3. Have self-employment income (see below); or
4. Prefer the most accurate withholding for multiple job situations.

**Self-employment.** Generally, you will owe both income and self-employment taxes on any self-employment income you receive separate from the wages you receive as an employee. If you want to pay these taxes through withholding from your wages, use the estimator at [www.irs.gov/W4App](http://www.irs.gov/W4App) to figure the amount to have withheld.

**Nonresident alien.** If you're a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

## Specific Instructions

**Step 1(c).** Check your anticipated filing status. This will determine the standard deduction and tax rates used to compute your withholding.

**Step 2.** Use this step if you (1) have more than one job at the same time, or (2) are married filing jointly and you and your spouse both work.

Option **(a)** most accurately calculates the additional tax you need to have withheld, while option **(b)** does so with a little less accuracy.

If you (and your spouse) have a total of only two jobs, you may instead check the box in option **(c)**. The box must also be checked on the Form W-4 for the other job. If the box is checked, the standard deduction and tax brackets will be cut in half for each job to calculate withholding. This option is roughly accurate for jobs with similar pay; otherwise, more tax than necessary may be withheld, and this extra amount will be larger the greater the difference in pay is between the two jobs.



**Multiple jobs.** Complete Steps 3 through 4(b) on only one Form W-4. Withholding will be most accurate if you do this on the Form W-4 for the highest paying job.

**Step 3.** This step provides instructions for determining the amount of the child tax credit and the credit for other dependents that you may be able to claim when you file your tax return. To qualify for the child tax credit, the child must be under age 17 as of December 31, must be your dependent who generally lives with you for more than half the year, and must have the required social security number. You may be able to claim a credit for other dependents for whom a child tax credit can't be claimed, such as an older child or a qualifying relative. For additional eligibility requirements for these credits, see Pub. 501, Dependents, Standard Deduction, and Filing Information. You can also include **other tax credits** for which you are eligible in this step, such as the foreign tax credit and the education tax credits. To do so, add an estimate of the amount for the year to your credits for dependents and enter the total amount in Step 3. Including these credits will increase your paycheck and reduce the amount of any refund you may receive when you file your tax return.

### Step 4 (optional).

**Step 4(a).** Enter in this step the total of your other estimated income for the year, if any. You shouldn't include income from any jobs or self-employment. If you complete Step 4(a), you likely won't have to make estimated tax payments for that income. If you prefer to pay estimated tax rather than having tax on other income withheld from your paycheck, see Form 1040-ES, Estimated Tax for Individuals.

**Step 4(b).** Enter in this step the amount from the Deductions Worksheet, line 5, if you expect to claim deductions other than the basic standard deduction on your 2022 tax return and want to reduce your withholding to account for these deductions. This includes both itemized deductions and other deductions such as for student loan interest and IRAs.

**Step 4(c).** Enter in this step any additional tax you want withheld from your pay **each pay period**, including any amounts from the Multiple Jobs Worksheet, line 4. Entering an amount here will reduce your paycheck and will either increase your refund or reduce any amount of tax that you owe.

**Step 2(b)—Multiple Jobs Worksheet** (Keep for your records.)

If you choose the option in Step 2(b) on Form W-4, complete this worksheet (which calculates the total extra tax for all jobs) on **only ONE** Form W-4. Withholding will be most accurate if you complete the worksheet and enter the result on the Form W-4 for the highest paying job.

**Note:** If more than one job has annual wages of more than \$120,000 or there are more than three jobs, see Pub. 505 for additional tables; or, you can use the online withholding estimator at [www.irs.gov/W4App](http://www.irs.gov/W4App).

- 1 Two jobs.** If you have two jobs or you're married filing jointly and you and your spouse each have one job, find the amount from the appropriate table on page 4. Using the "Higher Paying Job" row and the "Lower Paying Job" column, find the value at the intersection of the two household salaries and enter that value on line 1. Then, **skip** to line 3 . . . . . **1** \$ \_\_\_\_\_
- 2 Three jobs.** If you and/or your spouse have three jobs at the same time, complete lines 2a, 2b, and 2c below. Otherwise, skip to line 3.
  - a** Find the amount from the appropriate table on page 4 using the annual wages from the highest paying job in the "Higher Paying Job" row and the annual wages for your next highest paying job in the "Lower Paying Job" column. Find the value at the intersection of the two household salaries and enter that value on line 2a . . . . . **2a** \$ \_\_\_\_\_
  - b** Add the annual wages of the two highest paying jobs from line 2a together and use the total as the wages in the "Higher Paying Job" row and use the annual wages for your third job in the "Lower Paying Job" column to find the amount from the appropriate table on page 4 and enter this amount on line 2b . . . . . **2b** \$ \_\_\_\_\_
  - c** Add the amounts from lines 2a and 2b and enter the result on line 2c . . . . . **2c** \$ \_\_\_\_\_
- 3** Enter the number of pay periods per year for the highest paying job. For example, if that job pays weekly, enter 52; if it pays every other week, enter 26; if it pays monthly, enter 12, etc. . . . . **3** \_\_\_\_\_
- 4 Divide** the annual amount on line 1 or line 2c by the number of pay periods on line 3. Enter this amount here and in **Step 4(c)** of Form W-4 for the highest paying job (along with any other additional amount you want withheld) . . . . . **4** \$ \_\_\_\_\_

**Step 4(b)—Deductions Worksheet** (Keep for your records.)

- 1** Enter an estimate of your 2022 itemized deductions (from Schedule A (Form 1040)). Such deductions may include qualifying home mortgage interest, charitable contributions, state and local taxes (up to \$10,000), and medical expenses in excess of 7.5% of your income . . . . . **1** \$ \_\_\_\_\_
- 2** Enter:  $\left\{ \begin{array}{l} \bullet \$25,900 \text{ if you're married filing jointly or qualifying widow(er)} \\ \bullet \$19,400 \text{ if you're head of household} \\ \bullet \$12,950 \text{ if you're single or married filing separately} \end{array} \right\}$  . . . . . **2** \$ \_\_\_\_\_
- 3** If line 1 is greater than line 2, subtract line 2 from line 1 and enter the result here. If line 2 is greater than line 1, enter "-0-" . . . . . **3** \$ \_\_\_\_\_
- 4** Enter an estimate of your student loan interest, deductible IRA contributions, and certain other adjustments (from Part II of Schedule 1 (Form 1040)). See Pub. 505 for more information . . . . . **4** \$ \_\_\_\_\_
- 5 Add** lines 3 and 4. Enter the result here and in **Step 4(b)** of Form W-4 . . . . . **5** \$ \_\_\_\_\_

**Privacy Act and Paperwork Reduction Act Notice.** We ask for the information on this form to carry out the Internal Revenue laws of the United States. Internal Revenue Code sections 3402(f)(2) and 6109 and their regulations require you to provide this information; your employer uses it to determine your federal income tax withholding. Failure to provide a properly completed form will result in your being treated as a single person with no other entries on the form; providing fraudulent information may subject you to penalties. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation; to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws; and to the Department of Health and Human Services for use in the National Directory of New Hires. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by Code section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.

**Married Filing Jointly or Qualifying Widow(er)**

Higher Paying Job Annual Taxable Wage & Salary	Lower Paying Job Annual Taxable Wage & Salary											
	\$0 - 9,999	\$10,000 - 19,999	\$20,000 - 29,999	\$30,000 - 39,999	\$40,000 - 49,999	\$50,000 - 59,999	\$60,000 - 69,999	\$70,000 - 79,999	\$80,000 - 89,999	\$90,000 - 99,999	\$100,000 - 109,999	\$110,000 - 120,000
\$0 - 9,999	\$0	\$110	\$850	\$860	\$1,020	\$1,020	\$1,020	\$1,020	\$1,020	\$1,020	\$1,770	\$1,870
\$10,000 - 19,999	110	1,110	1,860	2,060	2,220	2,220	2,220	2,220	2,220	2,970	3,970	4,070
\$20,000 - 29,999	850	1,860	2,800	3,000	3,160	3,160	3,160	3,160	3,910	4,910	5,910	6,010
\$30,000 - 39,999	860	2,060	3,000	3,200	3,360	3,360	3,360	4,110	5,110	6,110	7,110	7,210
\$40,000 - 49,999	1,020	2,220	3,160	3,360	3,520	3,520	4,270	5,270	6,270	7,270	8,270	8,370
\$50,000 - 59,999	1,020	2,220	3,160	3,360	3,520	4,270	5,270	6,270	7,270	8,270	9,270	9,370
\$60,000 - 69,999	1,020	2,220	3,160	3,360	4,270	5,270	6,270	7,270	8,270	9,270	10,270	10,370
\$70,000 - 79,999	1,020	2,220	3,160	4,110	5,270	6,270	7,270	8,270	9,270	10,270	11,270	11,370
\$80,000 - 99,999	1,020	2,820	4,760	5,960	7,120	8,120	9,120	10,120	11,120	12,120	13,150	13,450
\$100,000 - 149,999	1,870	4,070	6,010	7,210	8,370	9,370	10,510	11,710	12,910	14,110	15,310	15,600
\$150,000 - 239,999	2,040	4,440	6,580	7,980	9,340	10,540	11,740	12,940	14,140	15,340	16,540	16,830
\$240,000 - 259,999	2,040	4,440	6,580	7,980	9,340	10,540	11,740	12,940	14,140	15,340	16,540	17,590
\$260,000 - 279,999	2,040	4,440	6,580	7,980	9,340	10,540	11,740	12,940	14,140	16,100	18,100	19,190
\$280,000 - 299,999	2,040	4,440	6,580	7,980	9,340	10,540	11,740	13,700	15,700	17,700	19,700	20,790
\$300,000 - 319,999	2,040	4,440	6,580	7,980	9,340	11,300	13,300	15,300	17,300	19,300	21,300	22,390
\$320,000 - 364,999	2,100	5,300	8,240	10,440	12,600	14,600	16,600	18,600	20,600	22,600	24,870	26,260
\$365,000 - 524,999	2,970	6,470	9,710	12,210	14,670	16,970	19,270	21,570	23,870	26,170	28,470	29,870
\$525,000 and over	3,140	6,840	10,280	12,980	15,640	18,140	20,640	23,140	25,640	28,140	30,640	32,240

**Single or Married Filing Separately**

Higher Paying Job Annual Taxable Wage & Salary	Lower Paying Job Annual Taxable Wage & Salary											
	\$0 - 9,999	\$10,000 - 19,999	\$20,000 - 29,999	\$30,000 - 39,999	\$40,000 - 49,999	\$50,000 - 59,999	\$60,000 - 69,999	\$70,000 - 79,999	\$80,000 - 89,999	\$90,000 - 99,999	\$100,000 - 109,999	\$110,000 - 120,000
\$0 - 9,999	\$400	\$930	\$1,020	\$1,020	\$1,250	\$1,870	\$1,870	\$1,870	\$1,870	\$1,970	\$2,040	\$2,040
\$10,000 - 19,999	930	1,570	1,660	1,890	2,890	3,510	3,510	3,510	3,610	3,810	3,880	3,880
\$20,000 - 29,999	1,020	1,660	1,990	2,990	3,990	4,610	4,610	4,710	4,910	5,110	5,180	5,180
\$30,000 - 39,999	1,020	1,890	2,990	3,990	4,990	5,610	5,710	5,910	6,110	6,310	6,380	6,380
\$40,000 - 59,999	1,870	3,510	4,610	5,610	6,680	7,500	7,700	7,900	8,100	8,300	8,370	8,370
\$60,000 - 79,999	1,870	3,510	4,680	5,880	7,080	7,900	8,100	8,300	8,500	8,700	8,970	9,770
\$80,000 - 99,999	1,940	3,780	5,080	6,280	7,480	8,300	8,500	8,700	9,100	10,100	10,970	11,770
\$100,000 - 124,999	2,040	3,880	5,180	6,380	7,580	8,400	9,140	10,140	11,140	12,140	13,040	14,140
\$125,000 - 149,999	2,040	3,880	5,180	6,520	8,520	10,140	11,140	12,140	13,320	14,620	15,790	16,890
\$150,000 - 174,999	2,040	4,420	6,520	8,520	10,520	12,170	13,470	14,770	16,070	17,370	18,540	19,640
\$175,000 - 199,999	2,720	5,360	7,460	9,630	11,930	13,860	15,160	16,460	17,760	19,060	20,230	21,330
\$200,000 - 249,999	2,970	5,920	8,310	10,610	12,910	14,840	16,140	17,440	18,740	20,040	21,210	22,310
\$250,000 - 399,999	2,970	5,920	8,310	10,610	12,910	14,840	16,140	17,440	18,740	20,040	21,210	22,310
\$400,000 - 449,999	2,970	5,920	8,310	10,610	12,910	14,840	16,140	17,440	18,740	20,040	21,210	22,470
\$450,000 and over	3,140	6,290	8,880	11,380	13,880	16,010	17,510	19,010	20,510	22,010	23,380	24,680

**Head of Household**

Higher Paying Job Annual Taxable Wage & Salary	Lower Paying Job Annual Taxable Wage & Salary											
	\$0 - 9,999	\$10,000 - 19,999	\$20,000 - 29,999	\$30,000 - 39,999	\$40,000 - 49,999	\$50,000 - 59,999	\$60,000 - 69,999	\$70,000 - 79,999	\$80,000 - 89,999	\$90,000 - 99,999	\$100,000 - 109,999	\$110,000 - 120,000
\$0 - 9,999	\$0	\$760	\$910	\$1,020	\$1,020	\$1,020	\$1,190	\$1,870	\$1,870	\$1,870	\$2,040	\$2,040
\$10,000 - 19,999	760	1,820	2,110	2,220	2,220	2,390	3,390	4,070	4,070	4,240	4,440	4,440
\$20,000 - 29,999	910	2,110	2,400	2,510	2,680	3,680	4,680	5,360	5,530	5,730	5,930	5,930
\$30,000 - 39,999	1,020	2,220	2,510	2,790	3,790	4,790	5,790	6,640	6,840	7,040	7,240	7,240
\$40,000 - 59,999	1,020	2,240	3,530	4,640	5,640	6,780	7,980	8,860	9,060	9,260	9,460	9,460
\$60,000 - 79,999	1,870	4,070	5,360	6,610	7,810	9,010	10,210	11,090	11,290	11,490	11,690	12,170
\$80,000 - 99,999	1,870	4,210	5,700	7,010	8,210	9,410	10,610	11,490	11,690	12,380	13,370	14,170
\$100,000 - 124,999	2,040	4,440	5,930	7,240	8,440	9,640	10,860	12,540	13,540	14,540	15,540	16,480
\$125,000 - 149,999	2,040	4,440	5,930	7,240	8,860	10,860	12,860	14,540	15,540	16,830	18,130	19,230
\$150,000 - 174,999	2,040	4,460	6,750	8,860	10,860	12,860	15,000	16,980	18,280	19,580	20,880	21,980
\$175,000 - 199,999	2,720	5,920	8,210	10,320	12,600	14,900	17,200	19,180	20,480	21,780	23,080	24,180
\$200,000 - 449,999	2,970	6,470	9,060	11,480	13,780	16,080	18,380	20,360	21,660	22,960	24,250	25,360
\$450,000 and over	3,140	6,840	9,630	12,250	14,750	17,250	19,750	21,930	23,430	24,930	26,420	27,730



# Employee's Withholding Tax Exemption Certificate

Every employee, on or before the date of commencement of employment, shall furnish his or her employer with a signed Alabama withholding exemption certificate relating to the number of withholding exemptions which he or she claims, which in no event shall exceed the number to which the employee is entitled. In the event the employee inflates the number of exemptions allowed by this Chapter on Form A4, the employee shall pay a penalty of five hundred dollars (\$500) for such action pursuant to Section 40-29-75.

## Part I – To be completed by the employee

EMPLOYEE NAME	EMPLOYEE SOCIAL SECURITY NUMBER
STREET ADDRESS	CITY STATE ZIP CODE

## HOW TO CLAIM YOUR WITHHOLDING EXEMPTIONS

1. If you claim no personal exemption for yourself and wish to withhold at the highest rate, write the figure "0", sign and date Form A4 and file it with your employer. ....
2. If you are SINGLE or MARRIED FILING SEPARATELY, a \$1,500 personal exemption is allowed.  
Write the letter "S" if claiming the SINGLE exemption or "MS" if claiming the MARRIED FILING SEPARATELY exemption . . . . .
3. If you are MARRIED or SINGLE CLAIMING HEAD OF FAMILY, a \$3,000 personal exemption is allowed.  
Write the letter "M" if you are claiming an exemption for both yourself and your spouse or "H" if you are single with qualifying dependents and are claiming the HEAD OF FAMILY exemption. ....
4. Number of dependents (other than spouse) that you will provide more than one-half of the support for during the year. *See dependent qualification below.* . . . . .
5. Additional amount, if any, you want deducted each pay period. . . . . \$
6. **This line to be completed by your employer:** Total exemptions (example: employee claims "M" on line 3 and "2" on line 4. Employer should use column M-2 (married with 2 dependents) in the withholding tables) . . . . .

Under penalties of perjury, I certify that I have examined this certificate and to the best of my knowledge and belief, it is true, correct, and complete.

Employee's Signature \_\_\_\_\_ Date \_\_\_\_\_

## Part II – To be completed by the employer

EMPLOYER NAME	EMPLOYER IDENTIFICATION NUMBER (EIN)
ADDRESS	CITY STATE ZIP CODE

Employers are required to keep this certificate on file. If the employee is believed to have claimed more exemption than legally entitled or claims 8 or more dependent exemptions, the employer should contact the Department at the following address or phone number for verification: Alabama Department of Revenue, Withholding Tax Section, P.O. Box 327480, Montgomery, AL 36132-7480, by phone at (334) 242-1300, or by fax at (334) 242-0112. If the employee does not qualify for the exemptions claimed upon verification, the employer is required to withhold at the highest rate until the employee submits a corrected Form A4 reflecting the proper exemption they are entitled to claim.

**DEPENDENTS:** To qualify as your dependent (Line 4 above), a person must receive more than one-half of his or her support from you for the year and must be related to you as follows:

- Your son or daughter (including legally adopted children), grandchild, stepson, stepdaughter, son-in-law, or daughter-in-law;
- Your father, mother, grandparent, stepfather, stepmother, father-in-law, or mother-in-law;
- Your brother, sister, stepbrother, stepsister, half-brother, half-sister, brother-in-law, or sister-in-law;
- Your uncle, aunt, nephew, or niece (but only if related by blood).

## **ACKNOWLEDGEMENT**

### **SAFE SCHOOLS POLICY**

(Drugs, Alcohol, Tobacco, and Weapons)

#### **Drug and Alcohol Free Workplace**

The use, possession, distribution, and sale of alcohol and the illegal use, possession, distribution, and sale of drugs in a school building, on school grounds, on Board property, on school buses, or at school-sponsored functions are prohibited.

#### **Tobacco/Tobacco products**

The use of tobacco products and illegal possession, distribution, and sale of tobacco products on school property is prohibited. These prohibitions also apply to electronic cigarettes, vape pens, hookah pens, e-hookahs, vape pipes and any similar device designed to deliver nicotine, flavor and other chemicals via inhalation.

#### **Deadly Weapons**

The possession of a deadly weapon or dangerous instrument (defined in Board Policy) in a school building, on school grounds, on school property, on school buses, or at school-sponsored functions is prohibited except for authorized law enforcement personnel.

In addition to any criminal penalties that may be imposed, employees and substitutes that violate these policies will be subject to adverse personnel action, which may include termination. Employees will be terminated in accordance with the *Students First Act*. (Ala. Code 16-24C)

The Piedmont City Board of Education will implement a drug and alcohol free awareness program to inform employees of the dangers of drug abuse, the system's policy of maintaining a drug and alcohol free workplace, available drug counseling, rehabilitation, and penalties that may be imposed upon employees for drug abuse violations.

## **ACKNOWLEDGEMENT**

### **SAFE SCHOOLS POLICY**

(Drugs, Alcohol, Tobacco, and Weapons)

I, \_\_\_\_\_, have received a copy of the Piedmont City Board of Education's policy regarding safe schools, including the maintenance of a drug-free workplace, illegal drugs and alcohol, tobacco, and weapons.

I understand that as an employee/substitute of the Piedmont City School District I must abide by the terms of the system's policy including notifying the administration of any criminal drug statute conviction.

I also understand that the school district will take action against me if I violate the system policy.

\_\_\_\_\_  
Employee/Substitute Signature

\_\_\_\_\_  
Date

## **ACCEPTABLE USE POLICY FOR TECHNOLOGY RESOURCES**

### **Substitute Teachers**

#### **Purpose**

The purpose of this policy is to provide guidance on the acceptable use of computers, networks, the Internet, electronic mail, and related telecommunications equipment in the Piedmont City School system. The Piedmont City School (hereafter referred to as "PCS") system has purchased technology resources to serve many *Users* of the community. The term *User* refers to person (i.e., student, teacher, employee, substitute, parent, etc.) who uses the technology resources of the PCS. PCS has provided technology resources (i.e., computers, networks, the Internet electronic mail, software, etc) for the following purposes:

- To provide our students and faculty the resources to achieve program related goals/objectives
- To provide a communication link between PCS and the community
- To perform functions related to conducting business by PCS

#### **General**

Technology resources are an important part of our school system, and may enhance the educational experience for our students and assist employees in performance of the day-to-day operations of the school system. Employees and students of PCS may be allowed to use the school system's electronic mail system. The use of computers, networks, the Internet and electronic mail is a privilege that is granted to users. Violation of this policy may result in a *User* losing access to PCS technology.

#### **Student Access**

It is the policy of PCS that students will be allowed to access the Internet or use electronic mail (if requested by a teacher) only after receiving the written approval of their parent or legal guardian. The Internet is a very powerful information tool that provides tremendous educational opportunities; however, it also can provide information that is considered inappropriate for a K-12 educational environment. While PCS requires students to adhere to the standards contained in this policy, parents and guardians are ultimately responsible for setting and conveying the standards that their children should follow when using media and information sources, including the Internet. PCS supports and respects each family's right to decide whether or not to allow their child access to the Internet and electronic mail. Students and parents must agree to abide by this acceptable use policy before they will be allowed to access PCS technology resources. Failure to use PCS technology resources in an appropriate manner will subject the student to appropriate disciplinary action as prescribed by the Student Code of Conduct. In addition to established punishment under the Student Code of Conduct, a student may also have computer, network, Internet, and electronic mail privileges suspended or revoked.

#### **User Access**

PCS employees may also be allowed access to technology resources in conjunction with their job duties and responsibilities. PCS employees may also be asked to supervise students using technology resources. Each employee shall maintain responsibility for the technology resources under his or her supervision and control. Each *User*, including each employee, must agree to abide by this acceptable use policy before accessing any technology resources of PCS. Failure to use PCS technology resources in an appropriate manner as prescribed by Board policy, federal, state, and local law, will subject the *User* to appropriate disciplinary action up to and including termination. In addition, PCS may suspend or terminate access to PCS technology resources at its sole discretion.

#### **School Board Limitation of Liability**

PCS makes no warranties of any kind, either expressed or implied, that the functions or the services provided by the school system will be error-free or without defect. The school system will not be responsible for any damage *Users* may suffer, including but not limited to loss of data or interruption of service. The school system is not responsible for the accuracy or quality of information obtained through or stored on the equipment. All communications and information stored on computers owned by the school system shall be considered the property of the school system and may be retrieved, monitored, deleted, destroyed, modified, or used by PCS for any purpose at its sole discretion. PCS will not be responsible for financial obligations or any other damages incurred through the use of its technology resources.

#### **Copyright and Plagiarism**

1. Existing copyright law will be followed in using materials accessed through the Internet. Teachers will instruct students to respect copyright and to request permission to use materials when appropriate.
2. Plagiarism is not acceptable. Teachers will instruct students in appropriate research and citation practices.

#### **Acceptable and Unacceptable Use(s)**

The following uses of the PCS are considered acceptable:

1. Employees will use the technology resources only for purposes directly related to that person's job duties. Students may only use technology resources for purposes directly related to the student's educational program.
2. *Users* utilizing electronic mail through PCS will check their electronic mail frequently and delete unwanted messages promptly.
3. Employees will only be allowed to subscribe to discussion groups, chat rooms, and/or mail lists that are relevant to their job duties and responsibilities. Students may be allowed to subscribe to discussion groups, chat rooms or mail lists relevant to the student's educational program. Any student asking for subscription to one of these services must submit a written request to the *User's* teacher and receive the school principal's approval.

The following uses of the PCS technology resources are considered unacceptable:

1. Personal Safety
  - a. Student *Users* who have electronic mail established with an organization other than PCS will not access that mail from within PCS.
  - b. Student *Users* will not be allowed to use any external Instant Messaging service (e.g.-AOL)

- c. Users will not post personal contact information about themselves or others anywhere on the Internet except for educational purposes. Personal contact information includes home address, home telephone, school address or telephone number, work address or telephone numbers, e-mail addresses, etc.
  - d. Student *Users* will not agree to meet with someone they have met online without their parent's approval and participation
  - e. Students *Users* will immediately notify teachers, parents, or other school employees if they receive unsolicited e-mail, or e-mail from anyone that threatens, harasses, or makes the *Users* feel uncomfortable in any way.
2. Illegal Activities
  - a. *Users* may not use technology resources for commercial purposes, defined as offering or providing goods or services or purchasing goods or services for personal use. Purchases made for official purposes must be accomplished through the purchasing methods established by school board policy.
  - b. *Users* will not attempt to gain unauthorized access, (i.e., "hacking") to PCS computers or networks or go beyond their authorized access. This includes attempting to log in through another person's account or access another person's files. These actions are illegal even if for browsing. *Users* may not utilize PCS technology resources to attempt to gain unauthorized access to a computer or network owned by other persons or entities.
  - c. *Users* will not attempt to disrupt computer system performance or destroy data by intentionally spreading computer viruses or by any other means. *Users* will not access any system or configuration file without specific permission from the superintendent or his designee.
  - d. *Users* will not use PCS's computer system to engage in or arrange to engage in illegal acts that could violate federal, state or local law or Board of Education policies and procedures, (i.e., arranging for the purchase of alcohol, drugs, engaging in gang activity, or threatening or harassing another person). Additionally, any action that is associated with a violation of the Student Code of Conduct is considered inappropriate use of the school computer system.
3. Inappropriate Internet Sites
  - a. In general, purposely visiting an inappropriate Internet site is the equivalent to bring the same inappropriate material to school in the form of a book, magazine, videotape, audiotape, or other media, and is subject to the same disciplinary actions as listed in the Student Code of Conduct. Any employee or other *User* Who accesses or visits inappropriate sites will be subject to appropriate disciplinary action up to and including termination.
  - b. Inappropriate Internet sites are sites that a reasonable person would conclude are inappropriate for a school environment. Specific examples include:
    - 1) Sites that advocate or give instruction on how to break the law.
    - 2) Sites that provide information or picture(s) that are lewd, obscene, vulgar, rude, inflammatory, threatening, or use profane or disrespectful language.
    - 3) Sites that advocate, in any manner, harm to the student, the school system or other individuals.
4. Inappropriate Language
  - a. Restrictions against inappropriate language apply to public messages, private messages, material posted in Web pages, and any media accessed, viewed, created or stored on PCS technology resources.
  - b. *Users* will not use obscene, profane, lewd, vulgar, threatening, or disrespectful language.
  - c. Users will not post information that, if acted upon, could cause damage or a danger of disruption.
  - d. *Users* will not engage in personal attacks, including prejudicial or discriminatory attacks.
  - e. *Users* will not harass another person. Harassment is defined as persistently acting in a manner that distress or annoys another person. If a *User* tells another person to stop sending messages to them, he or she must stop.
  - f. *Users* will not post false or defamatory information about a person or organization.

#### Privacy

1. All technology resources of PCS are to be used for educational and job related purposes. Communications and activities conducted by using PCS technology resources are not private, and *Users* do not have any right to privacy when using these resources. School administrators may, and will, at their sole discretion, review communications; activities and date created on, contained on, or accessed through PCS technology resources.
2. *Users* are hereby notified that monitoring software will be used that records what sites have been visited and from which computer the sites were accessed or viewed. PCS will utilize said software to monitor its technology resources to ensure compliance with federal, state and local law, PCS policy, and PCS's educational objectives.
3. *Users* are hereby notified that filtering software will be utilized to prevent access to inappropriate matter on the Internet and World Wide Web.
4. *Users* are hereby notified that all electronic mail will be subject to PCS monitoring and that all messages may be reviewed by appropriate system employees at their discretion for compliance with system policy, federal, state, or local law or PCS educational objectives.
5. *Users* will not post private information about another person.

As the Substitute Teacher, my signature indicates I have read or had explained to me and understand this Acceptable Use of Technology Policy, and accept responsibility for abiding by the terms and conditions outlined and using these resources for educational purposes.

Substitute Teacher (please print): \_\_\_\_\_

Substitute Teacher Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**Employment Eligibility Verification**  
**Department of Homeland Security**  
U.S. Citizenship and Immigration Services

**USCIS**  
**Form I-9**  
OMB No. 1615-0047  
Expires 10/31/2022

► **START HERE:** Read instructions carefully before completing this form. The instructions must be available, either in paper or electronically, during completion of this form. Employers are liable for errors in the completion of this form.

**ANTI-DISCRIMINATION NOTICE:** It is illegal to discriminate against work-authorized individuals. Employers **CANNOT** specify which document(s) an employee may present to establish employment authorization and identity. The refusal to hire or continue to employ an individual because the documentation presented has a future expiration date may also constitute illegal discrimination.

**Section 1. Employee Information and Attestation** *(Employees must complete and sign Section 1 of Form I-9 no later than the first day of employment, but not before accepting a job offer.)*

Last Name (Family Name)		First Name (Given Name)		Middle Initial	Other Last Names Used (if any)	
Address (Street Number and Name)		Apt. Number	City or Town		State	ZIP Code
Date of Birth (mm/dd/yyyy)	U.S. Social Security Number [ ][ ][ ] - [ ][ ] - [ ][ ][ ][ ]		Employee's E-mail Address		Employee's Telephone Number	

I am aware that federal law provides for imprisonment and/or fines for false statements or use of false documents in connection with the completion of this form.

I attest, under penalty of perjury, that I am (check one of the following boxes):

<input type="checkbox"/> 1. A citizen of the United States	
<input type="checkbox"/> 2. A noncitizen national of the United States <i>(See instructions)</i>	
<input type="checkbox"/> 3. A lawful permanent resident (Alien Registration Number/USCIS Number): _____	
<input type="checkbox"/> 4. An alien authorized to work until (expiration date, if applicable, mm/dd/yyyy): _____ Some aliens may write "N/A" in the expiration date field. <i>(See instructions)</i>	
<i>Aliens authorized to work must provide only one of the following document numbers to complete Form I-9: An Alien Registration Number/USCIS Number OR Form I-94 Admission Number OR Foreign Passport Number.</i>	
1. Alien Registration Number/USCIS Number: _____ <b>OR</b> 2. Form I-94 Admission Number: _____ <b>OR</b> 3. Foreign Passport Number: _____ Country of Issuance: _____	
QR Code - Section 1 Do Not Write In This Space	

Signature of Employee	Today's Date (mm/dd/yyyy)
-----------------------	---------------------------

**Preparer and/or Translator Certification (check one):**

☐ I did not use a preparer or translator. ☐ A preparer(s) and/or translator(s) assisted the employee in completing Section 1.  
*(Fields below must be completed and signed when preparers and/or translators assist an employee in completing Section 1.)*

I attest, under penalty of perjury, that I have assisted in the completion of Section 1 of this form and that to the best of my knowledge the information is true and correct.

Signature of Preparer or Translator		Today's Date (mm/dd/yyyy)	
Last Name (Family Name)		First Name (Given Name)	
Address (Street Number and Name)		City or Town	State ZIP Code



Employer Completes Next Page





**Employment Eligibility Verification**  
**Department of Homeland Security**  
U.S. Citizenship and Immigration Services

**USCIS**  
**Form I-9**  
OMB No. 1615-0047  
Expires 10/31/2022

**Section 2. Employer or Authorized Representative Review and Verification**

(Employers or their authorized representative must complete and sign Section 2 within 3 business days of the employee's first day of employment. You must physically examine one document from List A OR a combination of one document from List B and one document from List C as listed on the "Lists of Acceptable Documents.")

<b>Employee Info from Section 1</b>	Last Name (Family Name)	First Name (Given Name)	M.I.	Citizenship/Immigration Status
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<b>List A</b> Identity and Employment Authorization	<b>OR</b>	<b>List B</b> Identity	<b>AND</b>	<b>List C</b> Employment Authorization
Document Title		Document Title		Document Title
Issuing Authority		Issuing Authority		Issuing Authority
Document Number		Document Number		Document Number
Expiration Date (if any) (mm/dd/yyyy)		Expiration Date (if any) (mm/dd/yyyy)		Expiration Date (if any) (mm/dd/yyyy)
Document Title		<div>Additional Information</div> <div>QR Code - Sections 2 &amp; 3 Do Not Write In This Space</div>		
Issuing Authority				
Document Number				
Expiration Date (if any) (mm/dd/yyyy)				
Document Title				
Issuing Authority				
Document Number				
Expiration Date (if any) (mm/dd/yyyy)				

**Certification:** I attest, under penalty of perjury, that (1) I have examined the document(s) presented by the above-named employee, (2) the above-listed document(s) appear to be genuine and to relate to the employee named, and (3) to the best of my knowledge the employee is authorized to work in the United States.

The employee's first day of employment (mm/dd/yyyy): \_\_\_\_\_ (See instructions for exemptions)

Signature of Employer or Authorized Representative		Today's Date (mm/dd/yyyy)	Title of Employer or Authorized Representative Payroll Clerk	
Last Name of Employer or Authorized Representative Wood		First Name of Employer or Authorized Representative Emily	Employer's Business or Organization Name Piedmont City Schools	
Employer's Business or Organization Address (Street Number and Name) 502 Hood St W		City or Town Piedmont	State AL	ZIP Code 36272

**Section 3. Reverification and Rehires** (To be completed and signed by employer or authorized representative.)

<b>A. New Name (if applicable)</b>			<b>B. Date of Rehire (if applicable)</b>	
Last Name (Family Name)	First Name (Given Name)	Middle Initial	Date (mm/dd/yyyy)	

**C.** If the employee's previous grant of employment authorization has expired, provide the information for the document or receipt that establishes continuing employment authorization in the space provided below.

Document Title	Document Number	Expiration Date (if any) (mm/dd/yyyy)
----------------	-----------------	---------------------------------------

I attest, under penalty of perjury, that to the best of my knowledge, this employee is authorized to work in the United States, and if the employee presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.

Signature of Employer or Authorized Representative	Today's Date (mm/dd/yyyy)	Name of Employer or Authorized Representative
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## LISTS OF ACCEPTABLE DOCUMENTS

### All documents must be UNEXPIRED

Employees may present one selection from List A  
or a combination of one selection from List B and one selection from List C.

<b>LIST A</b> <b>Documents that Establish Both Identity and Employment Authorization</b>	<b>OR</b>	<b>LIST B</b> <b>Documents that Establish Identity</b>	<b>AND</b> <b>LIST C</b> <b>Documents that Establish Employment Authorization</b>
<ol style="list-style-type: none"> <li>1. U.S. Passport or U.S. Passport Card</li> <li>2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)</li> <li>3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa</li> <li>4. Employment Authorization Document that contains a photograph (Form I-766)</li> <li>5. For a nonimmigrant alien authorized to work for a specific employer because of his or her status:               <ol style="list-style-type: none"> <li>a. Foreign passport; and</li> <li>b. Form I-94 or Form I-94A that has the following:                   <ol style="list-style-type: none"> <li>(1) The same name as the passport; and</li> <li>(2) An endorsement of the alien's nonimmigrant status as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.</li> </ol> </li> </ol> </li> <li>6. Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI</li> </ol>		<ol style="list-style-type: none"> <li>1. Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address</li> <li>2. ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address</li> <li>3. School ID card with a photograph</li> <li>4. Voter's registration card</li> <li>5. U.S. Military card or draft record</li> <li>6. Military dependent's ID card</li> <li>7. U.S. Coast Guard Merchant Mariner Card</li> <li>8. Native American tribal document</li> <li>9. Driver's license issued by a Canadian government authority</li> <li><b>For persons under age 18 who are unable to present a document listed above:</b></li> <li>10. School record or report card</li> <li>11. Clinic, doctor, or hospital record</li> <li>12. Day-care or nursery school record</li> </ol>	<ol style="list-style-type: none"> <li>1. A Social Security Account Number card, unless the card includes one of the following restrictions:               <ol style="list-style-type: none"> <li>(1) NOT VALID FOR EMPLOYMENT</li> <li>(2) VALID FOR WORK ONLY WITH INS AUTHORIZATION</li> <li>(3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION</li> </ol> </li> <li>2. Certification of report of birth issued by the Department of State (Forms DS-1350, FS-545, FS-240)</li> <li>3. Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal</li> <li>4. Native American tribal document</li> <li>5. U.S. Citizen ID Card (Form I-197)</li> <li>6. Identification Card for Use of Resident Citizen in the United States (Form I-179)</li> <li>7. Employment authorization document issued by the Department of Homeland Security</li> </ol>

**Examples of many of these documents appear in the Handbook for Employers (M-274).**

**Refer to the instructions for more information about acceptable receipts.**

# DIRECT DEPOSIT

Employee payroll checks are now being deposited via ACH transfer to ANY checking account at ANY bank or credit union. The transfer is deposited on the last working day of each month. You will receive a direct deposit statement.

To enroll, please complete and return this form to the Central Office.

Attach a voided personal check from your existing account and complete the following:

Names of account holders: \_\_\_\_\_

Financial Institution: \_\_\_\_\_

Financial Institution Mailing Address: \_\_\_\_\_

Financial Institution Phone Number: \_\_\_\_\_

Account #: \_\_\_\_\_

Routing Transit #: \_\_\_\_\_

Please sign below that you provided the above information and that you authorize the direct deposit.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Attach voided check here

Substitute Pay Statements & W-2 forms will be provided through an Employee Self Service portal.

The directions to register for this service are on the Piedmont City School District Website. <http://www.piedmont.k12.al.us/>

Click on Search then choose Central Office from the menu on the side bar, then Documents. Scroll down to Employee Self Service Instructions.

Follow this link to register. <https://ess-piedmontcity.asc.edu/employeeselfservice>

The link is also on the PCSD website under Employee Benefits. You will need your social security number and your employee number provided by PCSD. If you have any problems registering, please feel free to contact me.

Emily Wood  
Payroll Clerk/Receptionist  
Piedmont City Schools  
ewood@pcsboe.us  
256-447-8831



## Identity Management

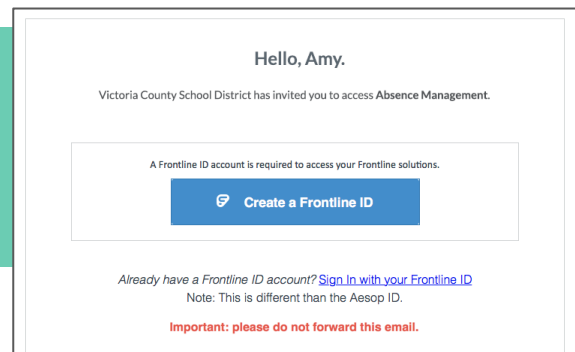
Once your organization upgrades to the Frontline Insights Platform, you can begin to utilize new and improved system functionality! These new upgrades allow you to log in to all your Frontline applications with a single username and password and to access any Frontline application via a single URL.

### GETTING STARTED

On the date your district upgrades, you will receive an invitation email to create a Frontline ID account.

This new account replaces your former login credentials and allows you to collectively access all your different Frontline applications via a new, single username and password.

Click **Create a Frontline ID** within the invitation email.



This selection takes you to a Sign In page where you must create login credentials in accordance to Frontline requirements.

### CREATING AN ACCOUNT

Your new username must contain 1 alphabet character and at least 4 total characters. (You can potentially use your email address, first initial and last name, or a different, district-preferred combination.)

The password must have 1 alphabet character, 1 number or special character, and 8 total characters.

Include an email address to provide a means for password recovery/verification and click the checkbox to accept the terms and conditions.

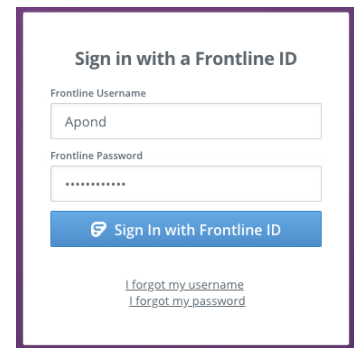
Once you are finished, click **Create Frontline ID**.

The system will prompt you to confirm your email as a final verification step. Once completed, the system enables access with your new username and password and requires these credentials for any future logins.

## SIGN ON PAGE

With the creation of your new Frontline ID account, you can access all your Frontline applications through a single sign-on page.


Go to [app.frontlineeducation.com](http://app.frontlineeducation.com), enter your new username and password, and click **Sign In**. The system recognizes your account configurations and presents applicable options based on your organizational setup.



**Sign in with a Frontline ID**

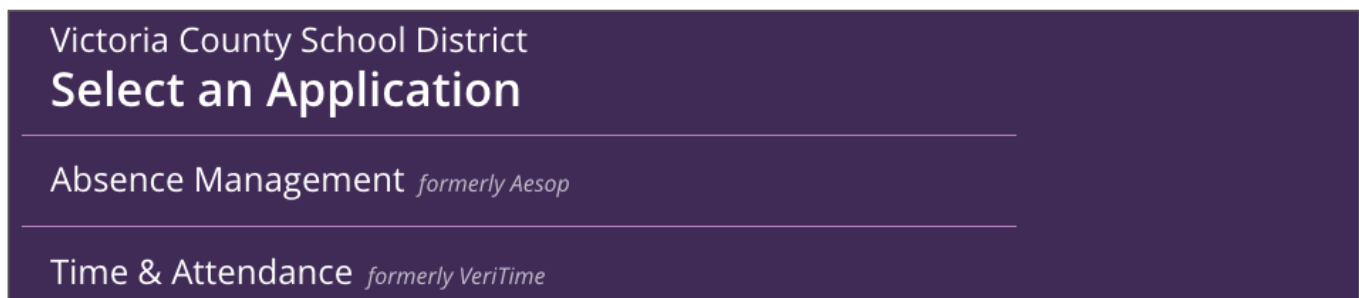
Frontline Username  
Apond

Frontline Password  
\*\*\*\*\*

 Sign In with Frontline ID

[I forgot my username](#)  
[I forgot my password](#)

If you belong to multiple organizations, the system will prompt you to choose which organization you want to access, and once selected, you will then choose from a list of your accessible Frontline applications.



**Victoria County School District**

## Select an Application


Absence Management *formerly Aesop*



Time & Attendance *formerly VeriTime*

## LAYOUT

When you log in, the system will display a side navigation bar that hosts application-specific options, and you will have a series of selectable options along the top purple bar. From this top bar, you can alternate between applications/districts (if applicable), access help resources, and manage your account.



**Absence Management** ▾ Victoria County School District ▾  Amy Pond ▾  
Employee 

**January 2018**

SUN	MON	TUE	WED	THU	FRI	SAT
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

**February 2018**

SUN	MON	TUE	WED	THU	FRI	SAT
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28			

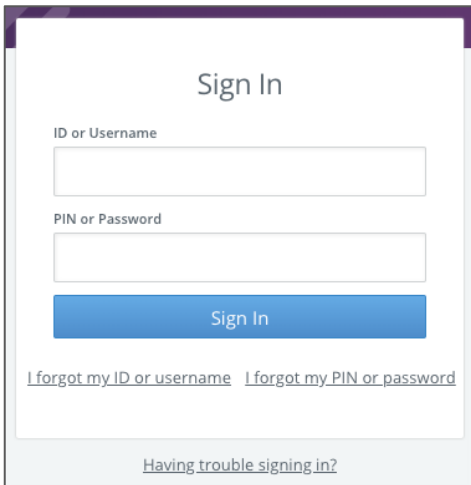
**March 2018**

SUN	MON	TUE	WED	THU	FRI	SAT
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

If you have any additional questions, please reference your application's Learning Center!



# Absence Management



Sign In

ID or Username

PIN or Password

Sign In

[I forgot my ID or username](#) [I forgot my PIN or password](#)

[Having trouble signing in?](#)

## SIGNING IN

Type [aesoponline.com](https://aesoponline.com) in your web browser's address bar or go to [app.frontlineeducation.com](https://app.frontlineeducation.com) if you have a Frontline Account.

The Sign In page will appear. Enter your ID/username and PIN/password and click **Sign In**.

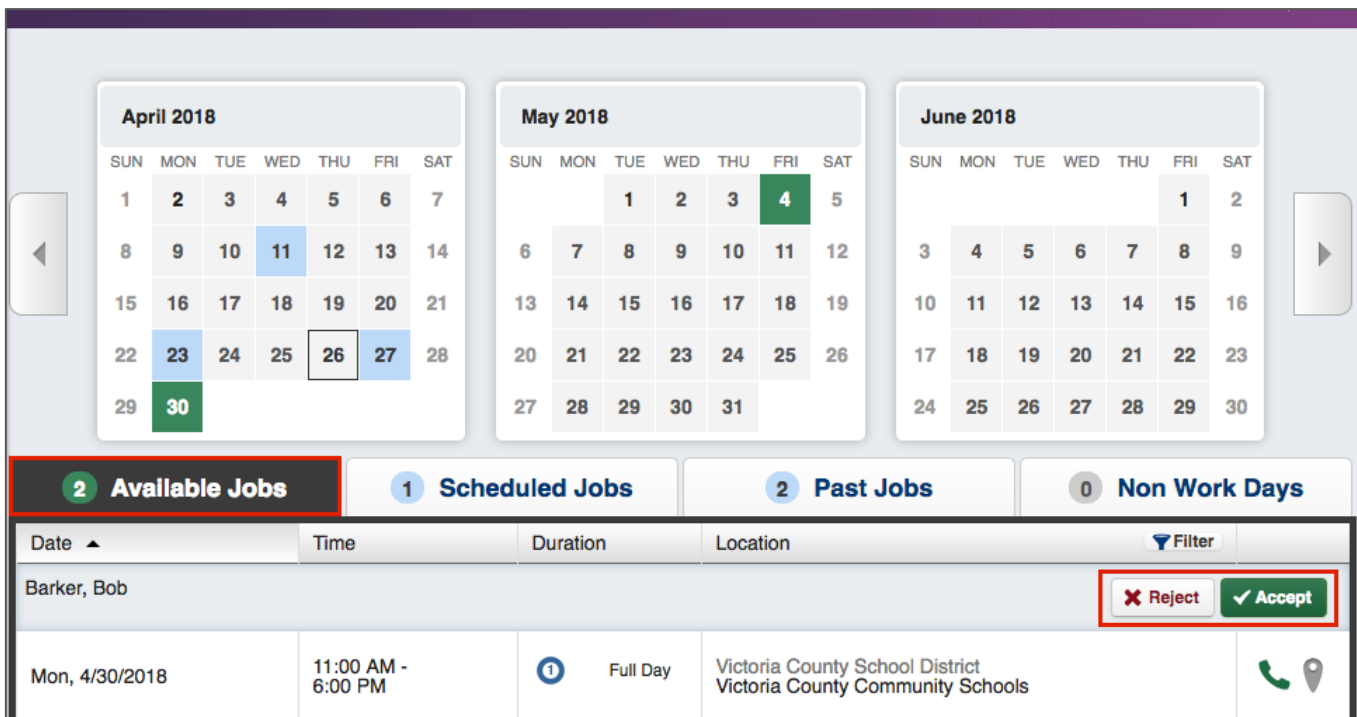
## RECOVERING CREDENTIALS

If you cannot recall your credentials, use the recovery options or click the “**Having trouble signing in?**” link for more details.

## SEARCHING FOR AVAILABLE JOBS

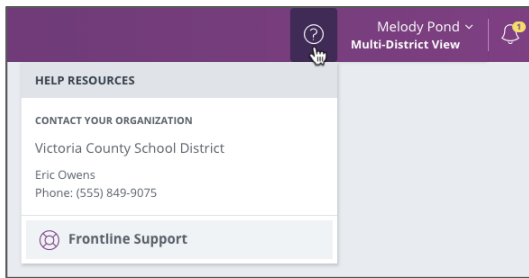
You can review available jobs directly on the homepage. These potential jobs appear in green on the calendar and in list form under the “Available Jobs” tab.

To accept a job, click the **Accept** button beside the absence (or click **Reject** to remove a job from the list).



The screenshot shows the Frontline Education Absence Management interface. At the top, there are three calendar views for April 2018, May 2018, and June 2018. Below the calendars, there are four tabs: **2 Available Jobs** (highlighted), **1 Scheduled Jobs**, **2 Past Jobs**, and **0 Non Work Days**. Below the tabs, there is a table with columns: Date, Time, Duration, Location, and Filter. The table shows a job for Bob Barker on Monday, 4/30/2018, from 11:00 AM to 6:00 PM, for a Full Day at Victoria County School District. The job is highlighted in green. To the right of the job, there are two buttons: **Reject** (with a red X icon) and **Accept** (with a green checkmark icon).

Date	Time	Duration	Location	Filter
Mon, 4/30/2018	11:00 AM - 6:00 PM	1 Full Day	Victoria County School District Victoria County Community Schools	<b>Reject</b> <b>Accept</b>



## GETTING HELP AND TRAINING

If you have questions, want to learn more about a certain feature, or want more information about a specific topic, click **Help Resources** and select **Frontline Support**. This opens a knowledge base of help and training materials.

## ACCESSING ABSENCE MANAGEMENT ON THE PHONE

In addition to web-based, system accessibility, you can also find and accept available jobs, manage personal information, change your PIN number, and more, all on the phone.

### When You Call into Absence Management

To call, dial **1-800-942-3767**. You'll be prompted to enter your ID number (followed by the # sign), then your PIN number (followed by the # sign).

When calling the Absence Management system, you can:

- Find available jobs – **Press 1**
- Review or cancel upcoming jobs – **Press 2**
- Review or cancel a specific job – **Press 3**
- Review or change your personal information – **Press 4**

### When the Absence Management System Calls You

If an available job has not been filled by another substitute two days before the absence is scheduled to start, the system will automatically begin to call substitutes and try to fill the job.

Keep in mind, when the system calls you, it will call about one job at a time, even if you're eligible for other jobs. You can always call in (see "When You Call into Absence Management" section above) to hear a list of all available jobs.

**Note:** When the system calls, be sure to say a loud and clear "Hello" after answering the call. This will ensure that the system knows you picked up the call.

When you receive a call, you can:

- Listen to available jobs – **Press 1**
- Prevent Absence Management from calling again today – **Press 2**
- Prevent Absence Management from ever calling again – **Press 9**

If you are interested in the available job, **Press 1**. You will be asked to enter your PIN number (followed by the # sign). The Absence Management system will list the job details, and you will have the opportunity to accept or reject the job.



# Alabama Applicant Processing Service (AAPS)

## Fingerprinting Overview

### STEP 1 - REGISTRATION

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If you live out of state and cannot travel to Alabama to be fingerprinted [CLICK HERE](#)  
Alabama applicants **MUST** be registered online prior to arriving at a fingerprint location  
Currently only Alabama State Department of Education (ALSDE) applicants may use AAPS

**Option 1 - Online Registration** – <https://www.aps.gemalto.com/AL>

- Applicants are responsible for their own registration. Information incorrectly entered during registration and submitted during fingerprinting CANNOT be corrected and is the responsibility of the applicants. Changes to incorrect registration data MAY be corrected online or by telephone prior to fingerprint submission.

**Option 2 - Telephone Registration** – 866-989-9316

- Gemalto Cogent encourages ALL applicants to register online.
- Applicants are responsible for their own registration. Information incorrectly entered during registration and submitted during fingerprinting CANNOT be corrected and is the responsibility of the applicants. Changes to incorrect registration data MAY be corrected online or by telephone prior to fingerprint submission.

**Option 3 - Out-of-State Applicants/Paper Fingerprint Cards**

- Out-of-State applicants may submit a completed fingerprint card AND a money order or cashiers check in the amount of \$54.90 made out to Gemalto Cogent. Applicants **MUST** register **ONLINE** prior to mailing in fingerprint cards AND must include their REGISTRATION ID. Submit fingerprint cards to:  
Gemalto Cogent  
ALSDE Cards Scan  
639 North Rosemead Boulevard  
Pasadena, CA 91107

### STEP 2 - PAYMENT

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**Fingerprint Fee is \$46.90**

- Applicants may pay online during registration using a debit or credit card
- No cash, credit card or business checks are accepted at the fingerprint locations.
- Applicants may pay at the fingerprint site with money order or cashier check
  - Payments must be made out to **Gemalto Cogent**
  - Payment amount for ALSDE fingerprinting is \$46.90

### STEP 3 - FINGERPRINTING

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Visit any Gemalto Cogent fingerprint location in Alabama. See Print Locations & Hours at <https://www.aps.gemalto.com/AL>

Be sure to bring valid identification with you to the print location. See What to Bring at <https://www.aps.gemalto.com/AL>

# Gemalto Cogent Identity Verification Procedures

## Primary Documents

Gemalto Cogent requires current, valid and unexpired picture identification documents. As a primary form of picture identification, a State issued driver's license may be presented by an applicant when being fingerprinted.

*For those applicants without a driver's license, a State identification card may be presented if the State's identification standards are the same as for the driver's license.*

However, in the absence of a new driver's license applicants may provide one or more Secondary Documents including:

- State Government Issued Certificate of Birth
- US Active Duty/Retiree/Reservist Military ID Card (000 10-2)
- Passport
- Social Security Card
- Certificate of Citizenship (N560)
- Certificate of Naturalization (N550)
- INS I-551 Resident Alien Card Issued since 1997
- INS 1-688 Temporary Resident Identification Card
- INS I-688B, I-766 Employment Authorization Card

## Secondary Documentation

Secondary documentation must be supported by at least two of the following:

- Utility Bill
- Voter Registration Card
- Vehicle Registration Card/Title
- Paycheck Stub with Name/Address
- Cancelled Check or Bank Statement

## SITE INFORMATION

Primary Service Location Address	<b>Busby Printing &amp; Mailing</b> 840 Snow Street Oxford, AL 36203
Hours of Operations	Mon, Tues, Weds and Thurs 9:00AM to 3:00PM <b>Closed Fridays and all Federal holidays</b>  Please do not overwhelm the service by sending large groups of applicants to the locations. <b>If you have a large group of applicants to fingerprint, please contact the fingerprint site and plan for their arrival to occur over days and weeks, not hours.</b> The fingerprint site may have a preferred method for handling large groups of applicants.
Telephone Number (Applicant Use)	<b>256-835-5679</b>  Please see <a href="http://www.aps.gemalto.com/AL">www.aps.gemalto.com/AL</a> for information pertaining to fingerprint processing. Neither Cogent Systems nor this fingerprint site have the means to provide applicants the status of their background check.
Web Site	
Directions to your facility	<a href="#">Map it</a>
Additional Information	Groups Call ahead

## SITE INFORMATION

Primary Service Location Address	<b>The UPS Store 3330</b> 1414 Golden Springs Rd Anniston, AL 36207
Hours of Operations	Mon, Tue, Thu & Fri 8:30am to 6:00pm Wed 8:30am to 5:30pm Saturday 9:30am to 4:30pm Sunday Closed  Please do not overwhelm the service by sending large groups of applicants to the locations. <b>If you have a large group of applicants to fingerprint, please contact the fingerprint site and plan for their arrival to occur over days and weeks, not hours.</b> The fingerprint site may have a preferred method for handling large groups of applicants.
Telephone Number (Applicant Use)	<b>256-835-8884</b>  Please see <a href="http://www.aps.gemalto.com/AL">www.aps.gemalto.com/AL</a> for information pertaining to fingerprint processing. Neither Cogent Systems nor this fingerprint site have the means to provide applicants the status of their background check.
Web Site	
Directions to your facility	<a href="#">Map it</a>  Take exit 188 off I-20, go North for approximately 2 miles. Located in the Green Brier Dear Shopping Center along with Winn Dixie.
Additional Information	

<b>Primary Service Location Address</b>	<b>Noccalula Academy</b> 1223 Noccalula Rd, Gadsden, AL 35904
<b>Hours of operation</b>	<p><b>Monday-Friday 9:30AM-5:30PM.</b>  <b>You must call ahead for an appointment.</b>  <b>Wear a mask and ONLY the person being fingerprinted can enter the building.</b>  <b>Please do NOT bring children with you to this appointment.</b></p> <p>Please do not overwhelm the service by sending large groups of applicants to the locations. <b>If you have a large group of applicants to fingerprint, please contact the fingerprint site and plan for their arrival to occur over days and weeks, not hours.</b> The fingerprint site may have a preferred method for handling large groups of applicants.</p>
<b>Phone Number (Applicant Use)</b>	<p>Shayla McCright 256-442-4960</p> <p>Please see <a href="https://www.aps.gemalto.com">https://www.aps.gemalto.com</a> for information pertaining to fingerprint processing and results. This fingerprint site <b>DOES NOT</b> have the means to provide applicants the status of their background check.</p>
<b>Directions to your facility</b>	<a href="#">Click here for directions</a>
<b>Additional Information</b>	You must have your registration completed before coming to the print site. Please make a copy of your registration (REG ID) number given to you at the completion of your registration.